

1.) CORPORATION NAME:

DUE DATE: **3/31/2012**

Siemens Medical Solutions USA, Inc.

SCC ID NO: **F0426694**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 51 VALLEY STREAM PKWY

CITY/ST/ZIP: MALVERN, PA 19355-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	THOMAS RACKOW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC VP/TREAS		
ADDRESS:	51 VALLEY STREAM PARKWAY		
CITY/ST/ZIP/CO:	MALVERN, PA 19355-		
NAME:	ALAN GOTLIFFE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	170 WOOD AVENUE SOUTH		
CITY/ST/ZIP/CO:	ISELIN, NJ 08830-		
NAME:	CHARLES DEARBORN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	51 VALLEYSTREAM PARKWAY		
CITY/ST/ZIP/CO:	MALVERN, PA 19355-1406		
NAME:	ERIC A SPIEGEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 NEW JERSEY AVENUE NW		
CITY/ST/ZIP/CO:	WASHINGTON,, DC 20001-		
NAME:	STEPHEN HART	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	51 VALLEYSTREAM PARKWAY		
CITY/ST/ZIP/CO:	MALVERN, PA 19355-1406		

NAME:	JOHN GLASER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	51 VALLEYSTREAM PARKWAY		
CITY/ST/ZIP/CO:	MALVERN, PA 19355-1406		
NAME:	BRITTA FUENFSTUECK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	2501 NORTH BARRINGTON ROAD		
CITY/ST/ZIP/CO:	HOFFMAN ESTATES, IL 60192-		
NAME:	JEFFREY BUNDY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	1230 SHOREBIRD WAY		
CITY/ST/ZIP/CO:	MOUNTAIN VIEW,, CA 94043-		
NAME:	MICHAEL BEIERWALTES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	51 VALLEY STREAM PARKWAY		
CITY/ST/ZIP/CO:	MALVERN, PA 19355-		
NAME:	CHRISTIAN RUMMEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	2501 NORTH BARRINGTON ROAD		
CITY/ST/ZIP/CO:	HOFFMAN ESTATES, IL 60192-		
NAME:	GREGORY SORENSEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT & CEO		
ADDRESS:	51 VALLEYSTREAM PARKWAY		
CITY/ST/ZIP/CO:	MALVERN, PA 19355-1406		
NAME:	FRANZ WIEHLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	1230 SHOREBIRD WAY		
CITY/ST/ZIP/CO:	MOUNTAIN VIEW, CA 94043-		
NAME:	ANTHONY D'ADAMIO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	51 VALLEYSTREAM PARKWAY		
CITY/ST/ZIP/CO:	MALVERN, PA 19355-1406		
NAME:	EDWARD GRADY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	51 VALLEYSTREAM PARKWAY		
CITY/ST/ZIP/CO:	MALVERN, PA 19355-1406		
NAME:	ANTHONIE GOUDEMOND	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	511 BENEDICT AVE		
CITY/ST/ZIP/CO:	TARRYTOWN, NY 10591-		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ERIC A SPIEGEL		
TITLE:	DIRECTOR		
ADDRESS:	300 NEW JERSEY AVENUE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20001-		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ ALAN GOTLIFFE	ALAN GOTLIFFE, ASST	2/11/2012	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY	DATE	
	PRINTED NAME AND CORPORATE TITLE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			